

04-14-00

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PTO/SB/05 (1/98)  
Approved for use through 09/30/2000. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 4076US (99-01860)

First Inventor or Application Identifier David E. Charlton

Title METHOD AND APPARATUS FOR STORING FAILING PART LOCATIONS IN A MODULE

Express Mail Label No. EL500249729US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

1. ☒ \* Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original, and a duplicate for fee processing)
2. ☒ Specification [Total Pages 13]  
(preferred arrangement set forth below)
  - Descriptive title of the Invention
  - Cross References to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to Microfiche Appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
3. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 3]
4. Oath or Declaration [Total Pages 2]
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 C.F.R. § 1.63(d))  
(for continuation/divisional with Box 17 completed)  
[Note Box 5 below]
    - i. ☐ DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).
5. ☐ Incorporation By Reference (useable if Box 4b is checked)  
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

6. ☐ Microfiche Computer Program (Appendix)
7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Copy
  - b. ☐ Paper Copy (identical to computer copy)
  - c. ☐ Statement verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

8. ☒ Assignment Papers (cover sheet & document(s))
9. ☒ 37 C.F.R. §3.73(b) Statement (when there is an assignee) ☒ Power of Attorney
10. ☐ English Translation Document (if applicable)
11. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS Citations
12. ☐ Preliminary Amendment
13. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
  - \* Small Entity ☐ Statement filed in prior application, Status still proper and desired (PTO/SB/09-12)
14. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
15. ☐ Other: .....
16. ☐ Other: .....

\* A new statement is required to be entitled to pay small entity fees, except where one has been filed in a prior application and is being relied upon.

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: \_\_\_\_\_

Prior application information: Examiner \_\_\_\_\_ Group / Art Unit: \_\_\_\_\_

## 18. CORRESPONDENCE ADDRESS

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(Insert Customer No. or Attach bar code label here)

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| Name (Print/Type) | Kenneth C. Booth        | Registration No. (Attorney/Agent) | 42,342   |
| Signature         | <i>Kenneth C. Booth</i> | Date                              | 04/13/00 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

# FEE TRANSMITTAL

## for FY 2000

*Patent fees are subject to annual revision.  
Small Entity payments must be supported by a small entity statement,  
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.  
See 37 C.F.R. §§ 1.27 and 1.28.*

TOTAL AMOUNT OF PAYMENT (\$ ) 768.00

### Complete if Known

|                      |                   |
|----------------------|-------------------|
| Application Number   | Not Yet Assigned  |
| Filing Date          | April 13, 2000    |
| First Named Inventor | David E. Charlton |
| Examiner Name        | Unknown           |
| Group / Art Unit     | Unknown           |
| Attorney Docket No.  | 4076US (99-01860) |

JCS20 US PTO  
 09/548826  
 04/13/00

| METHOD OF PAYMENT (check one)   | FEE CALCULATION (continued)  |  |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
|---|--|--|----------------------------|-----------------|----------|---------|---------|-------------------------------------|-----|---------|---------|--|---|---------|---------|---------------------------|---|-----------|-----------|--|---|----------|----------|--|---|--------------|------------|---|--------------|--------------|--------------|--|----------|---------|-----------|---|---|---------|----------|--|----|--------------------|---------|---|---|----------------------------|----------------------------|--|----------|---------|---------|------------------------|--|---------|---------|--|--|---------|---------|---------------------------------------|--|-----------|-----------|--|--|---------|--------|--|--|--------------|---------|------------------------------------|-------------|---|---------|--------------------------------|--|---------|---------|------------------|--|---------|---------|-----------------|--|---------|---------|-------------------------------|--|--------|--------|---|--|---------|---------|---|--|--------|--------|--|----|---------|---------|---|--|---------|---------|--|--|---------------------------|--|--|--|---------------------------|--|--|--|---|--|----------------------------|----------------------------|-----------------|----------|---------|---------|--------------------|-----|---------|---------|-------------------|---|---------|---------|------------------|---|---------|---------|--------------------|---|---------|--------|------------------------|---|--------------|--|--|--------------|--------------|--------------|----------------|----------|----|-----------|----|---|---|----------|----|----|--------------------|--|--|---|----------------------------|----------------------------|-----------------|----------|--------|-------|------------------------|--|--------|--------|-----------------------------------|--|---------|---------|---------------------------------------|--|--------|--------|--|--|--------|-------|--|--|--------------|--|--|-------------|---|
| <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number: 20-1469</p> <p>Deposit Account Name: TRASK, BRITT &amp; ROSSA</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:<br/> <input checked="" type="checkbox"/> Check    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other</p>  | <p>3. ADDITIONAL FEES</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105 130</td><td>205 65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127 50</td><td>227 25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>139 130</td><td>139 130</td><td>Non-English specification</td><td></td></tr> <tr><td>147 2,520</td><td>147 2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>112 920*</td><td>112 920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113 1,840*</td><td>113 1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115 110</td><td>215 55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116 380</td><td>216 190</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117 870</td><td>217 435</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118 1,360</td><td>218 680</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128 1,850</td><td>228 925</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119 300</td><td>219 150</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120 300</td><td>220 150</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121 260</td><td>221 130</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138 1,510</td><td>138 1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140 110</td><td>240 55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>141 1,210</td><td>241 605</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>142 1,210</td><td>242 605</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>143 430</td><td>243 215</td><td>Design issue fee</td><td></td></tr> <tr><td>144 580</td><td>244 290</td><td>Plant issue fee</td><td></td></tr> <tr><td>122 130</td><td>122 130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123 50</td><td>123 50</td><td>Petitions related to provisional applications</td><td></td></tr> <tr><td>126 240</td><td>126 240</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>581 40</td><td>581 40</td><td>Recording each patent assignment per property (times number of properties)</td><td>40</td></tr> <tr><td>146 690</td><td>246 345</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td><td></td></tr> <tr><td>149 690</td><td>249 345</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td><td></td></tr> <tr><td colspan="3">Other fee (specify) _____</td><td></td></tr> <tr><td colspan="3">Other fee (specify) _____</td><td></td></tr> <tr> <td colspan="2"> <p>1. 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| Large Entity Fee Code (\$)  | Small Entity Fee Code (\$)   | Fee Description  | Fee Paid                   |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 105 130   | 205 65   | Surcharge - late filing fee or oath  |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 127 50  | 227 25   | Surcharge - late provisional filing fee or cover sheet                     |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 139 130   | 139 130  | Non-English specification  |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 147 2,520   | 147 2,520  | For filing a request for reexamination                                     |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 112 920*  | 112 920*   | Requesting publication of SIR prior to Examiner action                     |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 113 1,840*  | 113 1,840*   | Requesting publication of SIR after Examiner action                        |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 115 110   | 215 55   | Extension for reply within first month                                     |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 116 380   | 216 190  | Extension for reply within second month                                    |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 117 870   | 217 435  | Extension for reply within third month                                     |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 118 1,360   | 218 680  | Extension for reply within fourth month                                    |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 128 1,850   | 228 925  | Extension for reply within fifth month                                     |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 119 300   | 219 150  | Notice of Appeal   |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 120 300   | 220 150  | Filing a brief in support of an appeal                                     |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 121 260   | 221 130  | Request for oral hearing   |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 138 1,510   | 138 1,510  | Petition to institute a public use proceeding                              |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 140 110   | 240 55   | Petition to revive - unavoidable   |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 141 1,210   | 241 605  | Petition to revive - unintentional   |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 142 1,210   | 242 605  | Utility issue fee (or reissue)   |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 143 430   | 243 215  | Design issue fee   |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 144 580   | 244 290  | Plant issue fee  |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 122 130   | 122 130  | Petitions to the Commissioner  |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 123 50  | 123 50   | Petitions related to provisional applications                              |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 126 240   | 126 240  | Submission of Information Disclosure Stmt                                  |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 581 40  | 581 40   | Recording each patent assignment per property (times number of properties) | 40                         |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 146 690   | 246 345  | Filing a submission after final rejection (37 CFR § 1.129(a))              |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 149 690   | 249 345  | For each additional invention to be examined (37 CFR § 1.129(b))           |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| Other fee (specify) _____   |  |  |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| Other fee (specify) _____   |  |  |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| <p>1. BASIC FILING FEE</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101 690</td><td>201 345</td><td>Utility filing fee</td><td>690</td></tr> <tr><td>106 310</td><td>206 155</td><td>Design filing fee</td><td>0</td></tr> <tr><td>107 480</td><td>207 240</td><td>Plant filing fee</td><td>0</td></tr> <tr><td>108 690</td><td>208 345</td><td>Reissue filing fee</td><td>0</td></tr> <tr><td>114 150</td><td>214 75</td><td>Provisional filing fee</td><td>0</td></tr> <tr> <td colspan="3">SUBTOTAL (1)</td> <td>(\$ ) 690.00</td> </tr> </tbody> </table> <p>2. EXTRA CLAIM FEES</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>19</td> <td>-20** = 0</td> <td>18</td> <td>0</td> </tr> <tr> <td>4</td> <td>-3** = 1</td> <td>78</td> <td>78</td> </tr> <tr> <td colspan="3">Multiple Dependent</td> <td>0</td> </tr> </tbody> </table> <p>**or number previously paid, if greater; For Reissues, see below</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>103 18</td><td>203 9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>102 78</td><td>202 39</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>104 260</td><td>204 130</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>109 78</td><td>209 39</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>110 18</td><td>210 9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="3">SUBTOTAL (2)</td> <td>(\$ ) 78.00</td> </tr> </tbody> </table> |  | Large Entity Fee Code (\$)   | Small Entity Fee Code (\$) | Fee Description | Fee Paid | 101 690 | 201 345 | Utility filing fee                  | 690 | 106 310 | 206 155 | Design filing fee                                      | 0 | 107 480 | 207 240 | Plant filing fee          | 0 | 108 690   | 208 345   | Reissue filing fee                     | 0 | 114 150  | 214 75   | Provisional filing fee                                 | 0 | SUBTOTAL (1) |            |   | (\$ ) 690.00 | Total Claims | Extra Claims | Fee from below                         | Fee Paid | 19      | -20** = 0 | 18                                      | 0 | 4       | -3** = 1 | 78                                     | 78 | Multiple Dependent |         |   | 0 | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description                        | Fee Paid | 103 18  | 203 9   | Claims in excess of 20 |  | 102 78  | 202 39  | Independent claims in excess of 3      |  | 104 260 | 204 130 | Multiple dependent claim, if not paid |  | 109 78    | 209 39    | ** Reissue independent claims over original patent |  | 110 18  | 210 9  | ** Reissue claims in excess of 20 and over original patent |  | SUBTOTAL (2) |         |                                    | (\$ ) 78.00 | <p>Reduced by Basic Filing Fee Paid</p> <p>SUBTOTAL (3) (\$ ) 40.00</p> |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| Large Entity Fee Code (\$)  | Small Entity Fee Code (\$)   | Fee Description  | Fee Paid                   |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 101 690   | 201 345  | Utility filing fee   | 690                        |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 106 310   | 206 155  | Design filing fee  | 0                          |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 107 480   | 207 240  | Plant filing fee   | 0                          |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 108 690   | 208 345  | Reissue filing fee   | 0                          |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 114 150   | 214 75   | Provisional filing fee   | 0                          |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| SUBTOTAL (1)  |  |  | (\$ ) 690.00               |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| Total Claims  | Extra Claims   | Fee from below   | Fee Paid                   |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 19  | -20** = 0  | 18   | 0                          |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 4   | -3** = 1   | 78   | 78                         |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| Multiple Dependent  |  |  | 0                          |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| Large Entity Fee Code (\$)  | Small Entity Fee Code (\$)   | Fee Description  | Fee Paid                   |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 103 18  | 203 9  | Claims in excess of 20   |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 102 78  | 202 39   | Independent claims in excess of 3  |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 104 260   | 204 130  | Multiple dependent claim, if not paid                                      |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 109 78  | 209 39   | ** Reissue independent claims over original patent                         |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| 110 18  | 210 9  | ** Reissue claims in excess of 20 and over original patent                 |                            |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |
| SUBTOTAL (2)  |  |  | (\$ ) 78.00                |                 |          |         |         |                                     |     |         |         |  |   |         |         |                           |   |           |           |  |   |          |          |  |   |              |            |   |              |              |              |  |          |         |           |   |   |         |          |  |    |                    |         |   |   |                            |                            |  |          |         |         |                        |  |         |         |  |  |         |         |                                       |  |           |           |  |  |         |        |  |  |              |         |                                    |             |   |         |                                |  |         |         |                  |  |         |         |                 |  |         |         |                               |  |        |        |   |  |         |         |   |  |        |        |  |    |         |         |   |  |         |         |  |  |                           |  |  |  |                           |  |  |  |   |  |                            |                            |                 |          |         |         |                    |     |         |         |                   |   |         |         |                  |   |         |         |                    |   |         |        |                        |   |              |  |  |              |              |              |                |          |    |           |    |   |   |          |    |    |                    |  |  |   |                            |                            |                 |          |        |       |                        |  |        |        |                                   |  |         |         |                                       |  |        |        |  |  |        |       |  |  |              |  |  |             |   |

| SUBMITTED BY      |                         | Complete (if applicable)          |                |
|-------------------|-------------------------|-----------------------------------|----------------|
| Name (Print/Type) | Kenneth C. Booth        | Registration No. (Attorney/Agent) | 42,342         |
| Signature         | <i>Kenneth C. Booth</i> | Telephone                         | (801) 532-1922 |
|                   |                         | Date                              | 04/13/2000     |

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